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| Chapter you are filing under: | |
|-------------------------------|---------------------------------------|
| ☐ Chapter 7 | |
| ☐ Chapter 11 | |
| ☐ Chapter 12 | |
| ■ Chapter 13 | ☐ Check if this an amended filing |
| | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|--------|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| y p | Write the name that is on your government-issued picture identification (for example, your driver's | Shalisa First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Gibson Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8815 | |

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Debtor 1 Shalisa Gibson

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 6545 S Claremont | If Debtor 2 lives at a different address: | | | |
| | | Chicago, IL 60636 | | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Cook County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Case number (if known) Debtor 1 Shalisa Gibson

| Par | Tell the Court About | our B | sankruptcy Ca | se | | | | |
|-----|---|--|--|--|---|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 | | | | | | |
| | choosing to file under | | | | | | | |
| | | □с | hapter 11 | | | | | |
| | | □с | hapter 12 | | | | | |
| | | ■ C | hapter 13 | | | | | |
| 8. | How you will pay the fee | • | about how yo | u may pay. Typica attorney is submit | ally, if you are paying the fee yo | ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | |
| | | | | | ments. If you choose this option | on, sign and attach the Application for Individuals to Pay | | |
| | | | I request that but is not req applies to you | t my fee be waive uired to, waive you ur family size and y | ed (You may request this option or fee, and may do so only if you are unable to pay the fee i | n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line tha n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition. | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | | |
| | lact o years. | | District | | When | Case number | | |
| | | | District | | When | Case number Case number | | |
| | | | District | | When | Case number | | |
| | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No |) | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y€ | 98. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | - | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | | D. Go to I | ne 12. | | | | |
| | residence? | ■ Ye | es. Has yo | ur landlord obtaine | ed an eviction judgment agains | st you? | | |
| | | | • | No. Go to line 12. | | | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petitic | | Judgment Against You (Form 101A) and file it with this | | |

Document Page 4 of 53 Case number (if known) Debtor 1 Shalisa Gibson Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Shalisa Gibson Document Page 5 of 53 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Shalisa Gibson **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shalisa Gibson Signature of Debtor 2 Shalisa Gibson Signature of Debtor 1 Executed on Executed on January 11, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Shalisa Gibson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Julie M Gleason | Date | January 11, 2018 | |
|--|---------------|--------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Julie M Gleason 6273536 | | | |
| Gleason & Gleason | | | |
| Firm name | | | |
| 77 W Washington, Ste 1218 | | | |
| Chicago, IL 60602 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone (312) 578-9530 | Email address | troy@chicagobk.com | |
| 6273536 IL | | | |
| Bar number & State | | | |

| | | | THE FAUL OULSE |) | |
|---------------------|--------------------------|-------------------|----------------|---|--------------------------------------|
| Fill in this infor | rmation to identify your | case: | | | |
| Debtor 1 | Shalisa Gibson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | – 0 |
| (if known) | | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | ssets f what you own |
|----|--|-------------|-------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 29,182.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 29,182.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 16,246.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 200.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 15,228.00 |
| | Your total liabilities | \$ | 31,674.00 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,387.50 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 890.00 |
| Pa | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | edules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | personal. | family, or |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

1,250.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total clai | im |
|--|------------|--------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 200.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 200.00 |

Document Page 10 of 53 Fill in this information to identify your case and this filing: Debtor 1 **Shalisa Gibson** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevy Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Camaro Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Debtor 2 only Current value of the Current value of the 100000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another Vehicle: \$10,682.00 \$10,682.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$10,682.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

claims or exemptions.

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|-------------------------------------|---|----------------------------|-----------------------------|--|-------------|--------------------------------|
| Debtor 1 | Shalisa Gibson | | | Case number | (if known) | |
| Yes. | Describe | | | | | |
| | | lousehold (chairs, sof | | niture, kitchen appliances, | | \$1,000.00 |
| □ No | | | | oment; computers, printers, scanner | s; music c | ollections; electronic devices |
| | | Consumer E , Video Pla | | g TV's, Phones, Computers, | | \$350.00 |
| Exampl ■ No | bles of value les: Antiques and figurines; other collections, memo | | | oks, pictures, or other art objects; sta | amp, coin, | or baseball card collections; |
| 9. Equipm Example | ent for sports and hobbie | | other hobby equipment; | bicycles, pool tables, golf clubs, skis | s; canoes a | and kayaks; carpentry tools; |
| ■ No | ns oles: Pistols, rifles, shotguns Describe | s, ammunitior | n, and related equipment | t | | |
| □ No . | s bles: Everyday clothes, furs Describe | , leather coat | ts, designer wear, shoes, | accessories | | |
| | Used C | Clothing | | | | \$200.00 |
| □ No | | ume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watche | s, gems, g | old, silver |
| | Misc. C | Costume Je | ewelry | |] | \$100.00 |
| Examp ■ No □ Yes. 14. Any ot ■ No | rm animals oles: Dogs, cats, birds, hors Describe her personal and househ Give specific information | old items yo | ou did not already list, in | ncluding any health aids you did r | not list | , |
| | the dollar value of all of your art 3. Write that number h | | | ny entries for pages you have atta | ached | \$1,650.00 |

Part 4: Describe Your Financial Assets

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Case number (if known) Debtor 1 **Shalisa Gibson** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No ■ Yes..... Cash on Hand \$30.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... 17.1. Bank of America Checking Account w/ \$20.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

page 3

Page 13 of 53 Case number (if known) Debtor 1 **Shalisa Gibson** 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **Estimated 2017 Tax Refund** \$1.800.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No Yes. Describe each claim....... \$15,000.00 Car Accident: Theodore Cooke Attorney 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Official Form 106A/B Schedule A/B: Property

Case 18-00816

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| 36. | Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here | | | \$16,850.00 |
|-----|---|---------------------------|------------------------------|-------------|
| Par | t 5: Describe Any Business-Related Property You Own or Have an Interest | est In. List any real est | ate in Part 1. | |
| | Do you own or have any legal or equitable interest in any business-relate | ed property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Par | t 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | Own or Have an Intere | st In. | |
| 46. | Do you own or have any legal or equitable interest in any farm- | or commercial fishii | ng-related property? | |
| | No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| Par | 7: Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| ı | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information | • | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that | at number here | | \$0.00 |
| Par | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$10,682.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,650.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$16,850.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$29,182.00 | Copy personal property total | \$29,182.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$29,182.00 |

Official Form 106A/B Schedule A/B: Property page 5

| | | | 1 | | | | | |
|---|---|-------------------|---|---------------------|---------------------------|--|--|--|
| Fill in this infor | Fill in this information to identify your case: | | | | | | | |
| Debtor 1 | Shalisa Gibson | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | | | |
| Case number | | | | | | | | |
| (if known) | | | | ☐ Check i amende | f this is an ed filing | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exe | mpt |
|--|-----|
|--|-----|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| 2012 Chevy Camaro 100000 miles Vehicle: | \$10,682.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Misc. Household Goods (bedroom furniture, kitchen appliances, tables, | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| chairs, sofas, etc.) Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Misc. Consumer Electronics (Including TV's, Phones, Computers, | \$350.00 | | \$350.00 | 735 ILCS 5/12-1001(b) | |
| Games, Video Players) Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Used Clothing Line from Schedule A/B: 11.1 | \$200.00 | | 100% | 735 ILCS 5/12-1001(a) | |
| Line Irom Schedule A.B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Misc. Costume Jewelry Line from Schedule A/B: 12.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| Line nom Schedule AVD. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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Case number (if known)

| De | Silalisa Gibsoli | | | | |
|------------------------------|---|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Cash on Hand Line from Schedule A/B: 16.1 | \$30.00 | | \$0.00 | 735 ILCS 5/12-1001(b) |
| | Line from Gonedate A/D. 19:1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Bank of America: Checking Account | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Estimated 2017 Tax Refund Line from Schedule A/B: 28.1 | \$1,800.00 | | \$1,800.00 | 735 ILCS 5/12-1001(b) |
| L | Line IIom Schedule A.B. 25.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Estimated 2017 Tax Refund Line from Schedule A/B: 28.1 | \$1,800.00 | | \$0.00 | 735 ILCS 5/12-1001(g)(1) |
| | Line IIom Schedule A.B. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Car Accident: Theodore Cooke Attorney | \$15,000.00 | | \$15,000.00 | 735 ILCS 5/12-1001(h)(4) |
| Line from Schedule A/B: 33.1 | | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustmer | nt.) |
| | ■ No | · | | · | |
| | ☐ Yes. Did you acquire the property cover | red by the exemption w | ithin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

| | Case | 19-00910 | Doc 1 Filed 01/11/18 Document | Page 17 | u U1/11/18 14.3 ' of 53 | s7.10 Desc N | iaiii |
|--|-------------------------------------|-------------------------|---|-----------------|----------------------------|-------------------------|---------------|
| Fill in | this information | n to identify you | | 1 (100. 17 | OF SS | | |
| | _ | | | | | | |
| Debto | | halisa Gibson | Middle Name | Last Name | | | |
| Debto | r 2 | | | | | | |
| (Spouse | if, filing) Fi | rst Name | Middle Name | Last Name | | | |
| United | l States Bankrup | otcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | | |
| Case | number | | | | | | |
| (if knowr | | | | | | ☐ Check | if this is an |
| | | | | | | amend | led filing |
| Offic | ial Farm 1 | neD. | | | | | |
| | ial Form 10 | | | _ | | | |
| <u>Sch</u> | edule D: | Creditors | Who Have Claims | Secure | d by Property | / | 12/15 |
| | | | If two married people are filing togeth | | | | |
| | ed, copy the Add · (if known). | itional Page, fill it o | out, number the entries, and attach it | to this form. O | n the top of any addition | al pages, write your na | me and case |
| 1. Do ar | ny creditors have | claims secured by | y your property? | | | | |
| | No. Check this | box and submit tl | his form to the court with your other | schedules. Yo | ou have nothing else to | report on this form. | |
| _ | | of the information | • | | J | • | |
| | | | below. | | | | |
| Part 1 | | cured Claims | | | Column A | Column B | Column C |
| | | | more than one secured claim, list the cre a particular claim, list the other creditors | | Amount of claim | Value of collateral | Unsecured |
| | | | cal order according to the creditor's nam | | Do not deduct the | that supports this | portion |
| 9 | Santander Co | nsumer | | | value of collateral. | claim | If any |
| | JSA | | Describe the property that secures | the claim: | \$16,246.00 | \$10,682.00 | \$5,564.00 |
| C | Creditor's Name | | 2012 Chevy Camaro 100000 | miles | | | |
| | | _ | Vehicle: | | | | |
| | 3585 N Stemn | nons Fwy, | As of the date you file, the claim is: | Check all that | | | |
| | Ste 1100N Dallas, TX 752 | 0.47 | apply. | | | | |
| _ | | | ☐ Contingent | | | | |
| N | Number, Street, City, | State & Zip Code | ☐ Unliquidated | | | | |
| Who | wes the debt? | Shock one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ | | oneck one. | ☐ An agreement you made (such as | mortango or soc | surod | | |
| | otor 1 only | | car loan) | mortgage or sec | uieu | | |
| _ | Debtor 2 only | | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit | | | | | | | |
| | | | ☐ Judgment lien from a lawsuit | | | | |
| | eck if this claim r mmunity debt | elates to a | ☐ Other (including a right to offset) | | | | |
| Date d | ebt was incurred | 2/2015 | Last 4 digits of account num | ber | | | |
| | | | | | | | |
| | | | | | | 1 | |
| Add | the dollar value o | of your entries in C | olumn A on this page. Write that num | ber here: | \$16,24 | 6.00 | |

If this is the last page of your form, add the dollar value totals from all pages. \$16,246.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | | Documer | nt Page 18 d | of 53 | | |
|--|--|--|---|--|---|---|---|
| Fill in | this inform | nation to identify your ca | se: | | | | |
| Debto | r 1 | Shalisa Gibson | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debto (Spouse | r 2 e if, filing) | First Name | Middle Name | Last Name | | | |
| United | d States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | |
| 0 | | _ | | | | | |
| Case i | number _{n)} | | | | | □ Check | if this is an |
| | | | | | | _ | led filing |
| Offic | ial Form | n 106E/F | | | | | |
| | | /F: Creditors Wh | o Have Unsecui | red Claims | | | 12/15 |
| iny exe Schedu Schedu eft. Atta | ecutory controlle G: Execut le G: Execut le D: Credito ach the Controlle nd case num | I accurate as possible. Use I racts or unexpired leases the tory Contracts and Unexpire ors Who Have Claims Secure tinuation Page to this page. aber (if known). I of Your PRIORITY Unse | at could result in a claim. A d Leases (Official Form 10 ed by Property. If more spa If you have no information | Also list executory cont 6G). Do not include any ice is needed, copy the l | racts on Schedule A/B: F creditors with partially s Part you need, fill it out, | Property (Official For secured claims that a number the entries i | m 106A/B) and on are listed in a the boxes on the |
| 1. Do | any credito | rs have priority unsecured o | laims against you? | | | | |
| | No. Go to Pa | art 2. | | | | | |
| | Yes. | | | | | | |
| ide po Pa | entify what typ ssible, list the art 1. If more t | priority unsecured claims. I be of claim it is. If a claim has to claims in alphabetical order a han one creditor holds a partio tition of each type of claim, see | ooth priority and nonpriority a according to the creditor's na- cular claim, list the other cred | mounts, list that claim he me. If you have more than ditors in Part 3. | re and show both priority a n two priority unsecured cl | and nonpriority amoun | ts. As much as |
| 2.1 | | Department of Revenu | e Last 4 digits of a | account number | \$200.00 | \$200.00 | \$0.00 |
| | Bankrup PO Box | editor's Name otcy Section 64338 o, IL 60664-0338 | When was the d | ebt incurred? | | - | |
| | | reet City State Zlp Code | | ou file, the claim is: Che | ck all that apply | | |
| _ | | I the debt? Check one. | ☐ Contingent | | | | |
| _ | Debtor 1 o | • | Unliquidated | | | | |
| | Debtor 2 o | • | ☐ Disputed | | | | |
| _ | _ | nd Debtor 2 only | | TY unsecured claim: | | | |
| | | e of the debtors and another | Domestic sup | | | | |
| | | his claim is for a community | | rtain other debts you owe | • | | |
| _ | s the claim s ■ No | ubject to offset? | | ath or personal injury while | | | |
| _ | ⊒ Yes | | ☐ Other. Specify | / | | | |
| Part 2 | List Al | I of Your NONPRIORITY | Unsecured Claims | | | | |
| | | rs have nonpriority unsecur | | | | | |
| | | re nothing to report in this part | | rt with your other schedule | es. | | |
| = | Yes. | | | | | | |
| | | nonpriority unsecured clain | | | | | |

Total claim

Part 2.

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Debtor 1 Shalisa Gibson Case number (if know) 4.1 Afni Last 4 digits of account number \$246.00 Nonpriority Creditor's Name 1310 Martin Luther King Dr. When was the debt incurred? **Bloomington, IL 61702** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 City of Chicago - Dept of Finance Last 4 digits of account number \$1,100.00 Nonpriority Creditor's Name **Administrative Hearings** When was the debt incurred? 121 N LaSalle St 107A Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Parking Tickets ☐ Yes 4.3 **Enhanced Recovery Corp** Last 4 digits of account number \$1,561.00 Nonpriority Creditor's Name When was the debt incurred? 8014 Bayberry Rd Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Shalisa Gibson Case number (if know) 4.4 **First Premier Bank** Last 4 digits of account number \$562.00 Nonpriority Creditor's Name 601 S. Minnesota Ave When was the debt incurred? Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.5 Illinois Department of Human Serv. Last 4 digits of account number \$382.00 Nonpriority Creditor's Name Cash Management Unit When was the debt incurred? PO Box 19407 Springfield, IL 62794-9407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 **Illinois Dept of Employment Securit** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **Bankruptcy Unit Collection** When was the debt incurred? Subdivis 33 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only

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Case number (if know)

| Illinois Tollway Authority | Last 4 digits of account number | \$1.00 | | | | |
|--|---|----------|--|--|--|--|
| Nonpriority Creditor's Name Attn: Legal Dept 2700 Ogden Ave. | When was the debt incurred? | | | | | |
| Downers Grove, IL 60515 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | , | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Yes | Other. Specify | | | | | |
| Jefferson Capital | Last 4 digits of account number | \$627.00 | | | | |
| Nonpriority Creditor's Name PO Box 953185 | When was the debt incurred? | | | | | |
| Saint Louis, MO 63195 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Oneon all that apply | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| Is the claim subject to offset? | report as priority claims | | | | | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Yes | Other. Specify | | | | | |
| Kennedy King College | Last 4 digits of account number | \$1.00 | | | | |
| Nonpriority Creditor's Name 6301 S Halsted Chicago, IL 60621 | When was the debt incurred? | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Yes | Other. Specify Tuition | | | | | |

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| Debto | Shalisa Gibson | Case number (if know) | |
|-------|---|---|----------------|
| 4.1 | Midland Cradit Managament | | ¢502.00 |
| 0 | Midland Credit Management Nonpriority Creditor's Name | Last 4 digits of account number | \$502.00 |
| | 2365 Northside Dr, Ste 300 | When was the debt incurred? | |
| | San Diego, CA 92108 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Agency | |
| 4.1 | Southwest Credit System | | \$246.00 |
| 1 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ240.00 |
| | 4120 International Parkway | When was the debt incurred? | |
| | Suite 1100 | | |
| | Carrollton, TX 75007 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| | _ | | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.1 | US Department of Education | | ¢40,000,00 |
| 2 | US Department of Education Nonpriority Creditor's Name | Last 4 digits of account number | \$10,000.00 |
| | C/O ECMC CA | When was the debt incurred? | |
| | PO Box 419033 | | |
| | Romeoville, IL 60446 | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Shalisa Gibson | | Case number (if know) |
|---|---|--|
| Name and Address Arnold Scott Harris 111 W. Jackson Ste 400 Chicago, IL 60604 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): Last 4 digits of account number | you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address City of Chicago Attn: Mayor Rahm Emanuel 121 N LaSalle, #507 Chicago, IL 60602 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): Last 4 digits of account number | you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address City of Chicago Corporation Counsel Attn: Edward Siskel 30 N LaSalle St, Room 700 Chicago, IL 60602 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address City of Chicago Dept of Law Attn: Charles King 121 North LaSalle Street, Suite 600 Chicago, IL 60602 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Comcast Corporate Office Headquarters 1701 John F Kennedy Boulevard Philadelphia, PA 19103 | On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address MCSI Inc 7330 College Drive #108 Palos Heights, IL 60463 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Midland Funding LLC PO Box 2011 Warren, MI 48090 | On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address New York & Co Comenity Bank PO Box 659728 San Antonio, TX 78265 | On which entry in Part 1 or Part 2 did Line 4.8 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Secretary of State Attn: Safety & Financial Resp 2701 S Dirksen Pkwy Springfield, IL 62723 | On which entry in Part 1 or Part 2 did Line 4.2 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Sprint Attn: Bankruptcy PO Box 7949 Overland Park, KS 66207 | Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.3 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address | On which entry in Part 1 or Part 2 did | vou list the original creditor? |

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Debtor 1 Shalisa Gibson

Case number (if know)

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015 Line 4.11 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 200.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 200.00 |
| | 01 | 9 . In the con- | 01 | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 15,228.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 15,228.00 |

| | | | .111 1 4400. 25 01 56 | | |
|---|----------------|-------------------|-----------------------|--|--|
| Fill in this information to identify your case: | | | | | |
| Debtor 1 | Shalisa Gibson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | |
| | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | <u> </u> |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | City | | State | ZIF Code | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | , | | | | |
| 2.4 | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | - | | |
| 2.0 | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| | Jily | | Ciaio | 211 0000 | |

| | | Docume | ent Page 26 d |) <u>1 53 </u> | |
|--|---|---|--|---|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Shalisa Gibson | | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filin | g) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | nor. | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| ~ <i></i> | - 40011 | | | | |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| 1. Do y No Yes 2. With Arizona No. Yes. | nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spou | you are filing a joint case, I lived in a community properties, New Mexico, Public, or legal equivalent live | do not list either spouse roperty state or territor lerto Rico, Texas, Washi e with you at the time? | y? (<i>Community property</i> ington, and Wisconsin.) | |
| in line Form 1 out Co | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the 6G). Use Schedule D, S | with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill ditor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | P Code | | Check all schedules | • |
| 3.1 | | | | ☐ Schedule D. line | |
| | Name | | | _ ☐ Schedule D, line | |
| | | | | ☐ Schedule G, line | |
| _ | Ni mah as Chrant | | | — <i>-</i> | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| | | | | Поль 11 5 :: | |
| 3.2 | Name | | | _ ☐ Schedule D, line | |
| | | | | ☐ Schedule E/F, lir☐ Schedule G, line | |
| - | | | | — Conedule O, line | |
| | Number Street City | State | ZIP Code | | |
| • | • | **** | | | |

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| Fill | in this information to identify your o | ase: | | | | I | | | |
|--------|---|--|---|-------------|-------|---|--|--|---------------------------|
| | otor 1 Shalisa Gib | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | e: NORTHERN DISTRI | CT OF ILLINOIS | | | | | | |
| O'Be a | fficial Form 1061 chedule I: Your Incas complete and accurate as posplying correct information. If you | sible. If two married peo | ng jointly, and your | spouse i | s liv | MM / DD/ and Debtor 2), being with you, inc | ed filing nent showin as of the form YYYY oth are equ lude inforr | ollowing date: ually respons mation about | 12/15 ible for your |
| atta | use. If you are separated and yo ch a separate sheet to this form. t 1: Describe Employment | On the top of any additi | | | | | | | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor | 2 or non-fi | iling spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | | | ☐ Emp | loyed employed | | |
| | employers. Include part-time, seasonal, or | Occupation | Hair | | | | | | |
| | self-employed work. Occupation may include student or homemaker, if it applies. | Employer's name Employer's address | Self | | | | | | |
| | | How long employed t | :here? | | | | | | |
| Esti | mate monthly income as of the cuse unless you are separated. | • | you have nothing to r | eport for | any | line, write \$0 in the | e space. In | clude your noi | n-filing |
| If yo | u or your non-filing spouse have me space, attach a separate sheet to | ore than one employer, contains this form. | ombine the informatio | n for all e | empl | oyers for that pers | on on the li | ines below. If y | you need |
| | | | | | | For Debtor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |

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| Deb | otor 1 | Shalisa Gibson | - | C | ase r | number (<i>if kr</i> | nown) | | | | |
|-----|--------------------|--|-----------|----------------|----------|-----------------------|-----------------|-----------|----------------------|--------------------|------------------|
| | | | | | | Debtor 1 | | | Debtor a-filing s | | |
| | Cop | by line 4 here | 4. | | \$ | (| 0.00 | \$ | | N/A | _ |
| 5. | List | t all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ۱. | \$ | (| 0.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | (| 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | | 0.00 | \$_ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | | 0.00 | \$ | | N/A | _ |
| | 5e. 5f. | Insurance | 5e 5f. | | \$ | | 0.00 | \$_ \$ | | N/A | _ |
| | 5g. | Domestic support obligations Union dues | 5g | | \$ — | | 0.00 | - \$ - | | N/A N/A | _ |
| | 5h. | Other deductions. Specify: | - | , | \$ — | | 0.00 | - : - | | N/A | _ |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | - 6. | | · \$ | | 0.00 | * — \$ | | N/A | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | * \$ | | 0.00 | \$ \$ | | N/A | = |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross | , . | | - | | 5.00 | | | | - |
| | | receipts, ordinary and necessary business expenses, and the total | _ | | • | | | | | | |
| | Oh | monthly net income. | 8a | | \$ | | 2.50 | \$_ \$ | | N/A | _ |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8b |). | \$ | | 0.00 | Φ_ | | N/A | _ |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | . | \$ | (| 0.00 | \$ | | N/A | |
| | 8d. | | 8d | | \$ | | 5.00 | \$_ | | N/A | _ |
| | 8e. | Social Security | 8e |) . | \$ | | 0.00 | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | <u>.</u> | \$ | (| 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retirement income | 8g | J. | \$ | | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: Tax Refund | _ 8h | 1.+ | \$ | 150 | 0.00 | + \$_ | | N/A | _ |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 1,387 | 7.50 | \$ | | N/A | 4 |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,387.50 | + \$ | | N/A | = \$ | 1,387.50 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ψ_ | | 1,307.30 | * | | 11// | | 1,307.30 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify: | depe | | | | | • | | e <i>J.</i> +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | 12. | \$ | 1,387.50 |
| 10 | D- | you expect an increase or degrees within the year often you file this farm | 2 | | | | | | | Combi month | ned ly income |
| 13. | = | you expect an increase or decrease within the year after you file this form No. | • | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| E:11- | in this info | tion to identify | ur ossa | | | ĺ | | |
|-------|-----------------------------|--|----------------------------|--|-----------------------|-----------------|------------------------------------|-------------------------------|
| | | tion to identify yo | | | | | | |
| Debt | tor 1 | Shalisa Gibs | on | | | | k if this is: An amended filing | |
| Debt | tor 2 | | | | | | A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | 1 | 13 expenses as of | the following date: |
| Unite | ed States Bankr | uptcy Court for the | : NORTH | ERN DISTRICT OF ILLING | OIS | 1 | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/15 |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people ar ch another sheet to this | | | | |
| Part | 11: Descr Is this a joir | ibe Your House | hold | | | | | |
| | ■ No. Go to | line 2. | in a sonar | ate household? | | | | |
| | □N | 0 | • | al Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No |
| 3. | Do your ext | enses include | _ | | | | | ☐ Yes |
| J. | expenses of | f people other t | han $_{oldsymbol{\sqcap}}$ | No Yes | | | | |
| | yourself and | d your depende | nts? — | 100 | | | | |
| exp | imate your ex | | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | n assistance an | | government assistance it cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| (Oil | ioiai i Oilii 10 | ··· <i>)</i> | | | | | , ca. cap | |
| 4. | | or home owners and any rent for the | | ses for your residence. In or lot. | nclude first mortgage | e 4. \$ | | 0.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | • | rty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | | | ıpkeep expenses | | 4c. \$ | | 0.00 |
| 5 | | owner's associat | | dominium dues our residence , such as ho | me equity loans | 4d. \$ 5. \$ | | 0.00 |

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| Deb | tor 1 | Shalisa Gil | oson | | Case num | nber (if known) | |
|----------|---------|--------------------|---|--|--------------------|---------------------|----------------------------|
| 6. | Utiliti | ies: | | | | | |
| 0. | 6a. | | eat, natural gas | | 6a. | \$ | 0.00 |
| | 6b. | - | , garbage collection | | 6b. | · · | 0.00 |
| | 6c. | | ell phone, Internet, satell | ite, and cable services | 6c. | | 100.00 |
| | 6d. | Other. Specif | • | ito, and capie convices | 6d. | | 0.00 |
| 7. | | • | eeping supplies | | 7. | · - | 250.00 |
| 7. 8. | | | dren's education costs | | 8. | · <u> </u> | 0.00 |
| 9. | | | | | 9. | · - | |
| | | | and dry cleaning | | 9. 10. | · - | 50.00 |
| | | cal and denta | ducts and services | | | | 50.00 |
| 11. | | | • | hua antuain fana | 11. | Φ | 50.00 |
| 12. | | ot include car | clude gas, maintenance, | bus of train rare. | 12. | \$ | 190.00 |
| 13 | | | , | pers, magazines, and books | 13. | · | 0.00 |
| | | | utions and religious do | - | 14. | · · | 0.00 |
| | | ance. | anono ana rongiouo ao | nanono | | | 0.00 |
| 10. | | | rance deducted from you | r pay or included in lines 4 or 20. | | | |
| | | Life insuranc | • | | 15a. | \$ | 0.00 |
| | 15b. | Health insura | ince | | 15b. | \$ | 0.00 |
| | 15c. | Vehicle insur | ance | | 15c. | \$ | 200.00 |
| | | Other insurar | | | 15d. | · <u> </u> | 0.00 |
| 16. | | | · · · | your pay or included in lines 4 or 20. | | <u> </u> | 0.00 |
| | Speci | | ao tantoo ao aa aa ta aa | , ca. pa, cc.accacc . c. 20. | 16. | \$ | 0.00 |
| 17. | | Ilment or leas | | | 47- | • | |
| | | Car payment | | | 17a. | · <u> </u> | 0.00 |
| | | | s for Vehicle 2 | | 17b. | * | 0.00 |
| | | Other. Specif | | | 17c. | · - | 0.00 |
| | | Other. Specif | · | | 17d. | \$ | 0.00 |
| 18. | Your | payments of | alimony, maintenance, | and support that you did not report | rt as 161). 18. | \$ | 0.00 |
| 10 | | | | ule I, Your Income (Official Form 10 ers who do not live with you. | 10. | \$ | |
| 19. | | | ou make to support our | ers who do not live with you. | 19. | · | 0.00 |
| 20 | Speci | | v ovnoncos not includo | d in lines 4 or 5 of this form or on S | | | |
| 20. | | | other property | u iii iiiles 4 or 3 or tilis forili or on t | 20a. | | 0.00 |
| | | Real estate to | | | 20b. | · · | 0.00 |
| | | | neowner's, or renter's ins | urance | 20c. | · | 0.00 |
| | | | , repair, and upkeep expe | | 20d. | · | 0.00 |
| | | | s association or condomi | | 20d. 20e. | · | |
| 24 | | | s association of condomi | mum dues | | φ +\$ | 0.00 |
| ۷۱. | Otne | r: Specify: | | | | +\$ | 0.00 |
| 22. | Calcu | ulate your mo | nthly expenses | | | | |
| | 22a. / | Add lines 4 thr | ough 21. | | | \$ | 890.00 |
| | 22b. (| Copy line 22 (ı | monthly expenses for Del | btor 2), if any, from Official Form 106 | J-2 | \$ | |
| | 22c. / | Add line 22a a | nd 22b. The result is you | ır monthly expenses. | | \$ | 890.00 |
| 22 | Cala | ulata waxa == = | mthly mot income | | | | _ |
| ∠3. | | - | nthly net income. | incomo) from Cohedula I | 00- | ¢ | 4 007 50 |
| | | | ., | income) from Schedule I. | 23a. | · | 1,387.50 |
| | ∠3D. | Copy your m | onthly expenses from line | e zzu above. | 23b. | -\$ | 890.00 |
| | 23c. | Subtract you | monthly expenses from | your monthly income. | | _ | |
| | | | your monthly net income. | | 23c. | \$ | 497.50 |
| 0.4 | De : | | | | | - f | |
| 24. | | | | your expenses within the year after our car loan within the year or do you expect | | | or decrease because of a |
| | | | expect to finish paying for you ms of your mortgage? | ar car roam within the year of do you expect | ı your mongage | payment to increase | e or decrease because or a |
| | | | , | | | | |
| | | _ | unlain bana. | | | | |
| | ■ No | _ | xplain here: | | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|---|--------------------------|---------------------------|--------------------------|---|
| Debtor 1 | Shalisa Gibson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| You must file thi | is form whenever you fi | n connection with a ban | s or amended schedule | es. Making a false state | ement, concealing property, or 0, or imprisonment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an atto | rney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare e true and correct. | that I have read the sum | nmary and schedules fi | led with this declaratio | on and |
| X /s/ Sha | alisa Gibson | | X | | |
| Shalis | a Gibson | | Signature of | of Debtor 2 | |
| Signatu | re of Debtor 1 | | | | |
| Date | January 11, 2018 | | Date | | |

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| Fill | in this inform | nation to identify you | r case: | | | |
|--------|-------------------|---------------------------------|---|------------------------------------|---|------------------------------------|
| Deb | otor 1 | Shalisa Gibson | | | | |
| Doh | otor 2 | First Name | Middle Name | Last Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| 0 | | | · | | | |
| (if kn | se number own) | | | | | check if this is an |
| | | | | | a | mended filing |
| | | | | | | |
| Of | ficial For | rm 107 | | | | |
| Sta | atement | of Financial | Affairs for Individ | duals Filing for E | Bankruptcy | 4/1 |
| infor | rmation. If me | | attach a separate sheet to | | e equally responsible for sup y additional pages, write you | |
| Par | f 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | us? | | | |
| | ☐ Married | | | | | |
| | ■ Not mari | ried | | | | |
| 2. | During the la | et 3 veare have vou | lived anywhere other than | where you live now? | | |
| ۲. | During the le | ist 5 years, nave you | iived arrywriere other than | where you live now: | | |
| | ■ No | | | | | |
| | | t all of the places you l | lived in the last 3 years. Do no | ot include where you live nov | N. | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there |
| • | Mattel to the Le | -10 | | -1 | | |
| | | | | | nity property state or territory Rico, Texas, Washington and W | |
| | ■ No | | | | | |
| | _ | ke sure you fill out <i>Sci</i> | hedule H: Your Codebtors (Of | fficial Form 106H). | | |
| | | · | , | , | | |
| Par | Explain | n the Sources of You | ır Income | | | |
| 4. | Fill in the tota | I amount of income yo | mployment or from operating u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | | in the details. | | | | |
| | | | Debtor 1 | | Dobtor 2 | |
| | | | Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | of current year until | ☐ Wages, commissions, | \$1,100.00 | ☐ Wages, commissions, | |
| uie | uate you met | u for ballkruptcy. | bonuses, tips | | bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| For | last calendar | r year: | ☐ Wages, commissions, | \$11,000.00 | ☐ Wages, commissions, | |
| (Jar | nuary 1 to De | cember 31, 2017) | bonuses, tips | | bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| Offici | al Form 107 | | Statement of Financial Aff | airs for Individuals Filing for E | Bankruptcy | page |

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Page 33 of 53 Document Shalisa Gibson Case number (if known) Debtor 1 **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$11,971.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο П Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for

No

Yes. List all payments to an insider.

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid

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Case number (if known) Document Debtor 1 Shalisa Gibson

| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | |
|--|---|--|----------------------------|---------------------|----------------------------|------------------------------|--|--|
| | No☐ Yes. List all payments to an insider | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount Am | nount you still owe | Reason for Include cred | this payment litor's name | | |
| Par | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No | | | | | | | |
| | Yes. Fill in the details. | Natura of the same | Count on amount | | Ctatus of th | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, foreclo | osed, garnish | ed, attached | d, seized, or levied? | | |
| | Creditor Name and Address | Describe the Property | | | Date Va | | | |
| | | Explain what happened | | | proper | | | |
| | Santander Consumer USA 8585 N Stemmons Fwy, Ste 1100N Dallas, TX 75247 | ■ Property was reposse □ Property was foreclos □ Property was garnishe □ Property was attached | essed. ed. ed. | 2018 | | \$17,000.00 | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | luding a bank or financia | ıl institution, | set off any a | amounts from your | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date a taken | ction was | Amount | | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes | | | | | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | | |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift. | tcy, did you give any gifts | s with a total value of mo | re than \$600 | per person | ? | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the gif | you gave ts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |

Document Case number (if known) Debtor 1 Shalisa Gibson 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? \square Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No П Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Filing Fee \$0 Gleason & Gleason 2017 \$350.00 77 W Washington, Ste 1218 Attorney Fees: \$350 Chicago, IL 60602 http://chilawyers.com **Summit Financial Education Inc Credit Counselling** 2017 \$14.95 4800 E Flower St **Tucson, AZ 85712** http://www.summitfe.org 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 18-00816 Doc 1 Filed 01/11/18 Entered 01/11/18 14:37:10 Desc Main Document Page 36 of 53

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| Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | |
|---|---|---|---|-------------|--|---|--|--|
| | Person Who Received Transfer Address Person's relationship to you | Description and v property transfer | | payme | be any property or ents received or debts exchange | Date transfer was made | | |
| 19. | Within 10 years before you filed for bankrup | /ithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device eneficiary? (These are often called asset-protection devices.) No | | | | | | |
| | Name of trust | Description and v | alue of the prop | erty trans | ferred | Date Transfer was | | |
| | | | | | | made | | |
| Par | t 8: List of Certain Financial Accounts, Ins | truments, Safe Deposit | Boxes, and Sto | rage Units | S | | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc □ No ■ Yes. Fill in the details. | r other financial accou | nts; certificates | of deposit | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | |
| | Bank of America PO Box 15168 Wilmington, DE 19850 | xxxx- | ☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other | | Switched accounts with same bank | \$0.00 | | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed for | bankruptcy, an | y safe dep | osit box or other depos | itory for securities, | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Address (Number, Street, City, | | he contents | Do you still have it? | | |
| 22. | Have you stored property in a storage unit o | r place other than your | home within 1 y | year before | e you filed for bankrupto | cy? | | |
| | No | | | | | | | |
| | Yes. Fill in the details. | Who also has an | and annear | Dogo-ibs 4 | ha contonta | Do you still | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe t | he contents | Do you still have it? | | |

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Debtor 1 Shalisa Gibson

| Pai | t 9: Identify Property You Hold or Control for S | Someone Else | | | | |
|--|---|--|---------|-------------------------------------|-----------------------|--|
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for for someone. | | | | | , or hold in trust | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | scribe the property | Value | |
| Pai | t 10: Give Details About Environmental Informa | tion | | | | |
| For | the purpose of Part 10, the following definitions a | apply: | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | |
| | Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s | | al law, | whether you now own, operate, o | or utilize it or used | |
| | Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si | | us wa | ste, hazardous substance, toxic s | substance, | |
| Rep | ort all notices, releases, and proceedings that yo | u know about, regardless of wh | en the | ey occurred. | | |
| 24. | Has any governmental unit notified you that you | may be liable or potentially liab | le un | der or in violation of an environme | ental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State & ZIP Code) | and | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State & ZIP Code) | and | Environmental law, if you know it | Date of notice | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | |
| Pai | t 11: Give Details About Your Business or Conn | nections to Any Business | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |

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Debtor 1 Shalisa Gibson Case number (if known)

| | ■ No. None of the above applies. Go to P | art 12. | | | |
|--------------|--|---|---|--|--|
| | Yes. Check all that apply above and fill in the details below for each business. | | | | |
| | Business Name Address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates business existed | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | |
| Par | 112: Sign Below | | | | |
| are t | | false statement, concealing property, or ol | declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both. | | |
| /s/ | Shalisa Gibson | | | | |
| | alisa Gibson nature of Debtor 1 | Signature of Debtor 2 | | | |
| Dat | January 11, 2018 | Date | | | |
| Did : ■ N | • | nt of Financial Affairs for Individuals Filing | g for Bankruptcy (Official Form 107)? | | |
| | you pay or agree to pay someone who is not | an attorney to help you fill out bankruptcy | r forms? | | |
| | | otcy Petition Preparer's Notice, Declaration, a | nd Signature (Official Form 110) | | |
| uY | es. Manie di Person - Allach The <i>Bankru</i> j | ncy remon Preparers Nouce, Declaration, a | nu olgnature (Ullicial Fullit 119). | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.



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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In r | e Shalisa Gibson | | Case No. | |
|---|--|---|------------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | NEY FOR DE | CBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, o | r agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 |
| | Prior to the filing of this statement I have received | 1 | . \$ | 350.00 |
| | | | | 3,650.00 |
| 2. | \$ of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed com | npensation with any other person u | nless they are members | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the n | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankrupb. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;d. [Other provisions as needed] | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed f | ee does not include the following s | ervice: | |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding. | ny agreement or arrangement for p | ayment to me for re | epresentation of the debtor(s) in |
| ١, | January 11, 2018 | /s/ Julie M Gleasor | 1 | |
| _ | Date | Julie M Gleason 62 | | |
| | | Signature of Attorney Gleason & Gleason | 1 | |
| | | 77 W Washington, | | |
| | | Chicago, IL 60602 | (0.10) 570 050 | |
| | | (312) 578-9530 Fa troy@chicagobk.ce | | ŀ |
| | | Name of law firm | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Shalisa Gibson | | Case No. | | |
|-------|---|---|------------|----|--|
| | | Debtor(s) | Chapter 13 | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| | | Number of | Creditors: | 25 | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | January 11, 2018 | /s/ Shalisa Gibson Shalisa Gibson Signature of Debtor | | | |

Afni 1310 Martin Luther King Dr. Bloomington, IL 61702

Arnold Scott Harris 111 W. Jackson Ste 400 Chicago, IL 60604

City of Chicago Attn: Mayor Rahm Emanuel 121 N LaSalle, #507 Chicago, IL 60602

City of Chicago - Dept of Finance Administrative Hearings 121 N LaSalle St 107A Chicago, IL 60602

City of Chicago Corporation Counsel Attn: Edward Siskel 30 N LaSalle St, Room 700 Chicago, IL 60602

City of Chicago Dept of Law Attn: Charles King 121 North LaSalle Street, Suite 600 Chicago, IL 60602

Comcast Corporate Office Headquarters 1701 John F Kennedy Boulevard Philadelphia, PA 19103

Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

First Premier Bank 601 S. Minnesota Ave Sioux Falls, SD 57104

Illinois Department of Human Serv. Cash Management Unit PO Box 19407 Springfield, IL 62794-9407

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Illinois Tollway Authority Attn: Legal Dept 2700 Ogden Ave. Downers Grove, IL 60515

Jefferson Capital PO Box 953185 Saint Louis, MO 63195

Kennedy King College 6301 S Halsted Chicago, IL 60621

MCSI Inc 7330 College Drive #108 Palos Heights, IL 60463

Midland Credit Management 2365 Northside Dr, Ste 300 San Diego, CA 92108

Midland Funding LLC PO Box 2011 Warren, MI 48090

New York & Co Comenity Bank PO Box 659728 San Antonio, TX 78265

Santander Consumer USA 8585 N Stemmons Fwy, Ste 1100N Dallas, TX 75247

Secretary of State Attn: Safety & Financial Resp 2701 S Dirksen Pkwy Springfield, IL 62723

Southwest Credit System 4120 International Parkway Suite 1100 Carrollton, TX 75007

Sprint
Attn: Bankruptcy
PO Box 7949
Overland Park, KS 66207

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015

US Department of Education C/O ECMC CA PO Box 419033 Romeoville, IL 60446